PTO/SB/30 (08-00) Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

REQUEST	FI
FOR	Fi
CONTINUED EXAMINATION (RCE)	-
TRANSMITTAL	- F1

Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA),

llection of information unless it displays a valid OMB control number.				
Application Number	10/686,579			
Filing Date	October 17, 2003			
First Named Inventor	Junichi HAYASHI			
Group Art Unit	2135			
Examiner Name	Randal D. Moran			
Attorney Docket Number	00862.023270			

36,570

	See	tinued p Change	resocution application (CPA) under 37 C.F.R. § 1.33(0) PTOSB29) instead of a RCE to be eligible for the patient form adjustment provisions of the APA.  133(0) PTOSB29 instead of RCE to be eligible for the patient form adjustment provisions of the APA.  134(0) PTOSB29 instead of RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to be eligible for the patient form adjustment provisions of the APA.  135(0) PTOSB29 instead of RCE to the RCE to the RCE to be eligible for the patient form adjustment provisions of the RCE to t	
1.	Submission required under 37 C.F.R. § 1.114			
	а.		Previously submitted	
		i. II.	Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on  Consider the amendment(s) retend amendment(s) retend above will be entered).  Consider the argument in the Appeal Brief or Reply Brief previously filed on	
		iii.	Other	
	b.	X	Enclosed	
		i. ii.	Amendment/Reply Affidavit(s)/Declaration(s)	
		iii. iv.	Information Disclosure Statement (IDS) Other	
2.	Mis	cellar		
	a.		Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months, Fee under 37 C.F.R. § 1.17(i) required)	
	b.		Other	
3.	Fe	es	The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.	
	a.	X	The Director is hereby authorized to charge any deficiencies in the following fees, or credit any overpayments, to Deposit Account No. 06-1205	
		i. ii. iii.	RCE fee required under 37 C.F.R. § 1.17(e) is being submitted electronically. Extension of time fee (37 C.F.R. § \$ 1.136 and 1.17) Other	
	b.		Check in the amount of \$ 810.00 is enclosed	
	c.		Payment by credit card (Form PTO-2038 enclosed)	

37 C.F.R. § 1.114 is effective on May 29, 2000. If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a

CERTIFICATE OF MAILING OR TRANSMISSION

Thereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCc, Commissioner for Patents, P.O. Box 1459, Alexandria, VA 22313-1450, or tacsimile transmitted to the U.S. Patent and Trademark Office on:

Name (Print/Type)

Signature

Date

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Registration No. (Attorney/Agent)

Date October 24, 2007

Button Hour Selement: This form is estimated to Lisé of 2 hours to complete. Time will use depending upon the needs of the individual cases, Any comments on the amount of time you are required to complete this form devid

Name (Print/Type)

Signature

Brian L. Klock

NOTE: